Case 15-43816 Doc 1 Filed 12/31/15 Entered 12/31/15 15:20:00 Desc Main Document Page 1 of 55

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

B 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	your	e the name that is on government-issued ure identification (for nple, your driver's	Brent First name Leonard	First name
		ise or passport).	Middle name	Middle name
	iden	g your picture tification to your ting with the trustee.	Herter Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.		other names you have d in the last 8 years		
		ude your married or den names.		
3.	you num Indi	y the last 4 digits of r Social Security aber or federal vidual Taxpayer atification number	xxx-xx-1833	

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Debtor 1 Brent Leonard Herter

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):				
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.				
	Include trade names and doing business as names	Business name(s)	Business name(s)				
		EINs	EINs				
5.	Where you live		If Debtor 2 lives at a different address:				
		800 Lake Cornish Way Algonquin, IL 60102					
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code				
		Kane County	County				
If your mailing a above, fill it in he		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.				
	Number, P.O. Box, Street, City, State & ZIP Code		Number, P.O. Box, Street, City, State & ZIP Code				
6.	Why you are choosing this district to file for	Check one:	Check one:				
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.				
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)				

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Debtor 1 Brent Leonard Herter

Case number (if known)

Par	Tell the Court About	Your B	ankruptcy Ca	se					
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
	choosing to file under	■ Chapter 7 □ Chapter 11 □ Chapter 12							
		□с	hapter 13						
3.	How you will pay the fee	k with the clerk's office in your local court for more details urself, you may pay with cash, cashier's check, or mone alf, your attorney may pay with a credit card or check with							
				the fee in inst	allments. If you choose this options (Official Form 103A).	on, sign and attach the Application for Individuals to Pay			
			but is not req	uired to, waive yo your family size	our fee, and may do so only if yo e and you are unable to pay the f	n only if you are filing for Chapter 7. By law, a judge may, ur income is less than 150% of the official poverty line ee in installments). If you choose this option, you must file			
	Have you filed for			cation to Have tr	ne Cnapter / Filing Fee Walved (Official Form 103B) and file it with your petition.			
).	Have you filed for bankruptcy within the	■ No							
	last 8 years?	□ Ye	es.						
			District	-		Case number			
			District		When	Case number			
			District		When	Case number			
0.	Are any bankruptcy cases pending or being	■ No)						
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Ye	es.						
			Debtor			Relationship to you			
			District	-	When	Case number, if known			
			Debtor			Relationship to you			
			District		When	Case number, if known			
I1. Do you rent your residence? Go to line 12.									
	. John College	□Ye	es. Has yo	ur landlord obtai	ined an eviction judgment agains	t you and do you want to stay in your residence?			
				No. Go to line 1	12.				
				Yes. Fill out <i>Init</i> bankruptcy peti		Judgment Against You (Form 101A) and file it with this			

Document Page 4 of 55 Case number (if known) Debtor 1 Brent Leonard Herter Part 3: Report About Any Businesses You Own as a Sole Proprietor Are you a sole proprietor No. of any full- or part-time Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation. partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of **Bankruptcy Code and are** operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ■ No. U.S.C. § 101(51D). Code. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any No. property that poses or is

alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

☐ Yes.

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

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Debtor 1 **Brent Leonard Herter** Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes

me incapable of realizing or making rational decisions

about finances.

My physical disability causes Disability. П

> me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active П military duty in a military

combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if anv.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a	briefing about credit
counseling because of	

Incapacity. I have a mental illness or a mental deficiency that makes me incapable

of realizing or making rational decisions about finances.

Disability. My physical disability causes me to

be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried

to do so.

Active duty. I am currently on active military duty

in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Document Page 6 of 55 Case number (if known) Debtor 1 Brent Leonard Herter

6: Answer These Questi	ons for Re	porting Purposes							
What kind of debts do you have?				defined in 11 U.S.C. § 101(8) as "incurred by an					
		☐ No. Go to line 16b.							
		Yes. Go to line 17.							
		Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.							
		☐ No. Go to line 16c.							
		☐ Yes. Go to line 17.							
	16c.	State the type of debts you owe the	nat are not consumer debts or busi	ness debts					
Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. G	o to line 18.						
Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for	— 103.	I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? No							
creditors?									
How many Creditors do you estimate that you owe?			☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000					
How much do you estimate your assets to be worth?	□ \$50,00 ■ \$100,0	1 - \$100,000 01 - \$500,000	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion					
How much do you estimate your liabilities to be?	\$50,00 \$100,0	1 - \$100,000 01 - \$500,000	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion					
7: Sign Below									
you	If I have of United State If no attorn document I request r I understa bankruptor 1519, and /s/ Brent Le Signature	nosen to file under Chapter 7, I and tes Code. I understand the relief and represents me and I did not part I have obtained and read the not relief in accordance with the chapter of case can result in fines up to \$2 3571. Leonard Herter of Debtor 1 December 30, 2015	n aware that I may proceed, if eligilavailable under each chapter, and ay or agree to pay someone who is ice required by 11 U.S.C. § 342(b). er of title 11, United States Code, someone property, or obtaining mone 50,000, or imprisonment for up to 2 Signature of Determine Executed on	ble, under Chapter 7, 11,12, or 13 of title 11, I choose to proceed under Chapter 7. I choose to proceed under Chapter 7. I not an attorney to help me fill out this . Specified in this petition. Bey or property by fraud in connection with a 20 years, or both. 18 U.S.C. §§ 152, 1341,					
	Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? How many Creditors do you estimate that you owe? How much do you estimate your assets to be worth? How much do you estimate your liabilities to be?	What kind of debts do you have? 16a. 16b. 16c. 16c. 16c. 16c. 16c. 16c. Yes. Po you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? How many Creditors do you estimate that you owe? 1-49 50-99 100-19 200-99 How much do you estimate your assets to be worth? No. 1-49 50-99 100-19 200-99 100-19 200-99 1100-09 1100-09 1100-09 1100-09 1100-09 1100-09 1100-09 1100-09 1100-09 1100-09 1100-09 1100-09 1100-09 1100-09 1100-09 1100-19 1100-09 1	What kind of debts do you have? 16a.	What kind of debts do you have? 16a.					

Debtor 1 Brent Leonard Herter Document Page 7 of 55 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Michele L. Aiken	Date	December 30, 2015
Signature of Attorney for Debtor		MM / DD / YYYY
Michele L. Aiken		
Printed name		
Aiken & Aiken, LLC		
Firm name		
2413 W. Algonquin Road, #154		
Algonquin, IL 60102		
Number, Street, City, State & ZIP Code		
Contact phone (847)245-2336	Email address	contact@aikenandaiken.com
6294353		
Bar number & State		

		1700.11111		
Fill in this infor	rmation to identify your	case:		
Debtor 1	Brent Leonard He	erter		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number (if known)				
(II KIIOWII)				Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	85,708.50
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	17,227.60
	1c. Copy line 63, Total of all property on Schedule A/B	\$	102,936.10
Par	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	182,989.40
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	42,350.24
	Your total liabilities	\$	225,339.64
Pai	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,691.29
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,121.52
Pai	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other s	chedules.
7.	■ Yes What kind of debt do you have?		

Official Form 106Sum

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

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Page 9 of 55 Case number (if known) Debtor 1 Brent Leonard Herter

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.

4,211.34

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	l otal c	laim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	9,425.55
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	9,425.55

	Cas	se 15-43816	Doc 1		12/31/15 ument	Entere Page 10		5 15:20:00	Des	c Main	
FIII	in this inform	ation to identify y	our case and t			T MIL. IX	7 (11 . 1.)				
Deb	tor 1	Brent Leonar		e Name		Last Name					
	tor 2 use, if filing)	First Name	Middle	e Name		Last Name					
Unit	ed States Ban	kruptcy Court for t	he: NORTHER	RN DISTF	RICT OF ILLIN	IOIS					
Cas	e number					-			I	☐ Check if amende	f this is an ed filing
_		m 106A/B • A/B: Pr	operty								12/15
fits	best. Be as con space is neede	parately list and des mplete and accurate d, attach a separate ach Residence, Buil	e as possible. If twee sheet to this form	vo married n. On the t	I people are fili top of any addi	ng together, b tional pages,	ooth are equally write your name	responsible for s	upplying c	orrect inform	ation. If
	No. Go to Part 2		table interest in a	ny residen	ce, building, la	nd, or similar	property?				
1.1	301 Applin	g Lane		What i	s the property		t apply.	Do not deduct se	oourad alair	na ar avamntia	ana Dut tha
		available, or other desc	ription		Single-family h Duplex or multi Condominium	i-unit building		amount of any se Creditors Who H	ecured clair	ns on <i>Schedui</i>	le D:
	Bolingbroo		60440-0000 ZIP Code		Manufactured of Land		9	Current value or entire property?	?	Current value	
	City	State	ZIF Code		Investment pro Timeshare Other as an interest		y? Check	Describe the na (such as fee sin a life estate), if	ture of you	ur ownership	interest
				one.	Debtor 1 only			Tenants by		reties	
	Will County			-	Debtor 2 only Debtor 1 and D At least one of	the debtors an		(see instruc		nunity propert	у
					information yo		Jointly own ex-spouse Currently n	ned with	a		

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

\$85,708.50

Debt	tor 1 B	rent Leonar	d Herter	Document Page 11 of 55 C	ase number (if known)	
3. C a	ars, vans,	trucks, tracte	ors, sport utility ve	hicles, motorcycles		
	No					
	Yes					
					Do not dodust accured	alaima ar avamationa. Dut
3.1	Make:	Buick		Who has an interest in the property? Check one.	the amount of any secu	claims or exemptions. Put red claims on Schedule D:
	Model: Year:	Regal 2012		Debtor 1 only		aims Secured by Property.
		nate mileage:	71,100	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
		ormation:	,	☐ At least one of the debtors and another		
				☐ Check if this is community property (see instructions)	\$10,530.00	\$10,530.00
5 A .p.	ages you 3: Descri	have attache	d for Part 2. Write	n for all of your entries from Part 2, including a that number here		\$10,530.00 Current value of the portion you own? Do not deduct secured claims or exemptions.
	ixamples: I No I Yes. De	,		, china, kitchenware		
			Used household	d goods and furnishings		\$800.00
E	•	Televisions an including cell լ		eo, stereo, and digital equipment; computers, print nedia players, games and DVD's	ters, scanners; music colle	ctions; electronic devices
9. E ¢	xamples: No Yes. De quipment xamples:	other collectionscribe for sports an Sports, photogrusical instru	ns, memorabilia, co d hobbies graphic, exercise, ar	prints, or other artwork; books, pictures, or other a llectibles ad other hobby equipment; bicycles, pool tables, go		
	Firearms Examples I No I Yes. De	·	, shotguns, ammuni	tion, and related equipment		

Debtor 1	Brent Leona	ard Herter	ocument	Page 12	Of 55 Case number (if known)	
I1. Cloth <i>Exai</i> □ No		lothes, furs, leather coats, des	signer wear, shoe	es, accessories		
■ Ye	s. Describe	Used clothing and app	arel			\$300.00
l2. Jewe <i>Exai</i> ■ No	•	ewelry, costume jewelry, engag	gement rings, we	edding rings, heir	loom jewelry, watches, gems,	gold, silver
	s. Describe					
	farm animals mples: Dogs, cats,	birds, horses				
■ No	,	,				
☐ Ye	s. Describe					
14. Any €		nd household items you did	not already list,	, including any h	nealth aids you did not list	
☐ Ye	s. Give specific in	formation				
		of all of your entries from P number here				\$1,350.00
	Describe Your Finan					
Do you	own or have any l	legal or equitable interest in	any of the follo	wing?		Current value of the portion you own? Do not deduct secured claims or exemptions.
□ No	mples: Money you		·	posit box, and or	n hand when you file your petit	ion
■ Ye	S				Amount of	
					cash in	
					debtors possession	\$20.00
					<u> </u>	
		savings, or other financial accounts			res in credit unions, brokerage	houses, and other similar
□ No			Institution	namo:		
■ Ye	S		mstitution	mame.		
		17.1. Checking	PNC Ba	nk, account N	o. *****3011	\$105.26
	mples: Bond funds	or publicly traded stocks , investment accounts with bro	okerage firms, m	oney market acc	counts	
	S	Institution or issuer	name:			
	publicly traded si joint venture	tock and interests in incorp	orated and unin	corporated bus	inesses, including an intere	st in an LLC, partnership,
■ No						
☐ Ye	s. Give specific in	formation about them Name of entity:			% of ownership:	
		orate bonds and other negonate bonds and other negonal checks, cas				

Official Form 106A/B Schedule A/B: Property page 3

Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

		Case 15	5-43816	Doc 1	Filed 12/31/15		5:20:00 D	esc Main
De	ebtor 1	Brent Leo	nard Herter		Document	Page 13 of 55 Case numb	oer (if known)	
	■ No □ Yes.	. Give specific i		oout them r name:				
21.	Exam □ No	,	in IRA, ERISA		1(k), 403(b), thrift saving	gs accounts, or other pension or p	orofit-sharing plan	ns
	■ Yes.	. List each acco		y. account:	Institution r Mahoney Retireme	Environmental Employees		\$3,221.34
22.	Yours		sed deposits	you have ma		tinue service or use from a comp ctric, gas, water), telecommunica		, or others
	☐ Yes.				Institution r	name or individual:		
23.	■ No					r life or for a number of years)		
	☐ Yes.		Issuer name	and descript	ion.			
	26 U.S ■ No	.C. §§ 530(b)(1), 529A(b), ar	nd 529(b)(1).		ogram, or under a qualified statence of any interests.11 U.S		nm.
25.	■ No	s, equitable or . Give specific			erty (other than anythin	ng listed in line 1), and rights on	^r powers exercis	sable for your benefit
26.	Exam ■ No	nples: Internet d	omain names	, websites, p	ets, and other intellect proceeds from royalties	and licensing agreements		
	☐ Yes.	. Give specific	information al	bout them				
27.	Exam ■ No	ses, franchises aples: Building p . Give specific	ermits, exclus	sive licenses		n holdings, liquor licenses, profes	ssional licenses	
M	oney or	property owe	d to you?					Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	■ No	efunds owed to		oout them, in	cluding whether you alr	eady filed the returns and the tax	years	
29.	Exam ■ No	y support aples: Past due . Give specific i	·		usal support, child supp	ort, maintenance, divorce settlem	nent, property set	ttlement
	. 00.							
30.	Exam		ages, disabilit unpaid loans	y insurance	payments, disability ber someone else	efits, sick pay, vacation pay, wo	rkers' compensa	tion, Social Security

Debtor 1	Brent Leonard H	Document	Page 14 01 55 Case number (if known)
	ests in insurance polic		int (LICA), aradit hamaquinar'a ar rantar'a inqui	******
□ No	ripies. Health, disability,	, or life insurance; nealth savings accoult	ınt (HSA); credit, homeowner's, or renter's insu	rance
	Nama tha ingurance a	company of each policy and list its value	•	
■ Yes	s. Name the insurance of	company of each policy and list its value Company name:	e. Beneficiary:	Surrender or refund
		Company name.	Delicition y.	value:
		Northwestern Mutual Term Life		
		Insurance Policy		
		Dealth Benefit: \$150,000	Newsy 9 Duialla Hautau	£4.00
	-	Beneficiary: ex-wife and daughte	er Nancy & Brielle Herter	\$1.00
If you some No Yes	u are the beneficiary of a eone has died. s. Give specific informa ns against third parties mples: Accidents, emplo s. Describe each claim.	s, whether or not you have filed a law byment disputes, insurance claims, or rig	e insurance policy, or are currently entitled to re	
_	s. Describe each claim.			
_ 100	3. Describe each claim.	Anticipated 2015 tax ref	fund	\$2,000.00
		7 iiiio.patoa 2010 tax 101		
No Yes 36. Addd for I Part 5: D 37. Do you No. C	Part 4. Write that num	ation	st In. List any real estate in Part 1.	\$5,347.60
		commercial Fishing-Related Property You O st in farmland, list it in Part 1.	Own or Have an Interest In.	
	ou own or have any lego. Go to Part 7.	gal or equitable interest in any farm-	or commercial fishing-related property?	
☐ Ye	es. Go to line 47.			
				Current value of the portion you own? Do not deduct secured claims or exemptions.
Part 7: D	Describe All Property You	Own or Have an Interest in That You Did No	lot List Above	
53. Do yo	ou have other property	y of any kind you did not already list?		
■ No	ripios. Season lickets, C	country club membership		
	Olympian and the form of	tion		
⊔ Yes	s. Give specific informat	tion		

Official Form 106A/B Schedule A/B: Property page 5

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Case number (if known)

Document

Debtor 1 **Brent Leonard Herter** 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$85,708.50 56. Part 2: Total vehicles, line 5 \$10,530.00 57. Part 3: Total personal and household items, line 15 \$1,350.00 58. Part 4: Total financial assets, line 36 \$5,347.60 59. Part 5: Total business-related property, line 45 \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 62. Total personal property. Add lines 56 through 61... \$17,227.60 Copy personal property total \$17,227.60 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$102,936.10

Official Form 106A/B Schedule A/B: Property page 6

		I A A A I I I I I I		
Fill in this info	rmation to identify your	case:		
Debtor 1	Brent Leonard He	erter		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	 -
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemptions are you claiming? Check one only, ev	ven if your spouse is filing with you.
	☐ You are claiming state and federal nonbankruptcy exemptions.	11 U.S.C. § 522(b)(3)

- You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
\$800.00		\$800.00	11 U.S.C. § 522(d)(3)
		100% of fair market value, up to any applicable statutory limit	
\$250.00		\$250.00	11 U.S.C. § 522(d)(3)
		100% of fair market value, up to any applicable statutory limit	
\$300.00		\$300.00	11 U.S.C. § 522(d)(3)
		100% of fair market value, up to any applicable statutory limit	
\$20.00		\$20.00	11 U.S.C. § 522(d)(5)
		100% of fair market value, up to any applicable statutory limit	
\$105.26		\$105.26	11 U.S.C. § 522(d)(5)
	\$250.00 \$20.00	\$250.00 \$20.00 \$20.00 \$20.00 \$300.00 \$	Check only one box for each exemption. Schedule A/B \$800.00 \$800.00 \$800.00 \$100% of fair market value, up to any applicable statutory limit \$250.00 \$100% of fair market value, up to any applicable statutory limit \$300.00 \$100% of fair market value, up to any applicable statutory limit \$20.00 \$20.00 \$100% of fair market value, up to any applicable statutory limit

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Debtor 1 Brent Leonard Herter Case number (if known)

Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
\$3,221.34	•	100%	11 U.S.C. § 522(d)(12)
		100% of fair market value, up to any applicable statutory limit	
\$1.00		\$1.00	11 U.S.C. § 522(d)(5)
		100% of fair market value, up to any applicable statutory limit	
\$2,000.00		\$2,000.00	11 U.S.C. § 522(d)(5)
	_		
		100% of fair market value, up to any applicable statutory limit	
	portion you own Copy the value from Schedule A/B \$3,221.34 \$1.00	portion you own Copy the value from Schedule A/B \$3,221.34 \$1.00	portion you own Copy the value from Schedule A/B \$3,221.34 \$100% 100% of fair market value, up to any applicable statutory limit \$1.00 100% of fair market value, up to any applicable statutory limit

		Document	Page 18	of 55		
Fill in this informa	ation to identify yo	ur case:				
Debtor 1	Brent Leonard	Herter				
DCDIOI 1	First Name	Middle Name	Last Name		-	
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name		-	
United Ctates Donl	crimtor. Court for the	NODTHERN DISTRICT OF HILL	NOIC			
United States Bank	kruptcy Court for the	NORTHERN DISTRICT OF ILLI	NOIS		-	
Case number						
(if known)					☐ Check	if this is an
					amend	led filing
Official Form	106D					
Schedule [O Creditor	s Who Have Claims	Secure	d by Proper	·tv	12/15
	or ourtor.	S Wile Have Claims		a by 1 Topol	• 9	12/10
		If two married people are filing together, t, number the entries, and attach it to thi				
. Do any creditors ha	ave claims secured by	vour property?				
	•		echadules V	nu have nothing also	to report on this form	
_		this form to the court with your other	scriedules. Y	ou nave nothing else	to report on this form.	
Yes. Fill in a	all of the information	below.				
Part 1: List All	Secured Claims					
2. List all secured cla	aims. If a creditor has r	more than one secured claim, list the credit	or separately fo	r Column A	Column B	Column C
each claim. If more th	nan one creditor has a p	particular claim, list the other creditors in Pa		Amount of claim	Value of collateral	Unsecured
as possible, list the cla	aims in alphabetical ord	der according to the creditor's name.		Do not deduct the value of collateral.	that supports this claim	portion If any
2.1 Ally		Describe the property that secures th	e claim:	\$18,992.93	\$10,530.00	\$8,462.93
Creditor's Name		2012 Buick Regal 71,100 mile				<u> </u>
		2012 Balok Rogal 71,100 Illik				
P.O. Box 90	001951					
Louisville,	KY	As of the date you file, the claim is: Cl apply.	heck all that			
40290-1951		Contingent				
Number, Street, C	City, State & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who owes the deb	t? Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only		☐ An agreement you made (such as m	ortgage or secu	red		
Debtor 2 only		car loan)				
Debtor 1 and Debt	tor 2 only	☐ Statutory lien (such as tax lien, mech	nanic's lien)			
☐ At least one of the	=	☐ Judgment lien from a lawsuit	iai iio o iio ii)			
☐ Check if this clair		•	Purchase	.		
community debt		Other (including a right to offset)	Money			
			Security			
		Last Adiates of account mounts				
Date debt was incurr	red <u>04/2013</u>	Last 4 digits of account number	er 9747			
2.2 BB&T Mort	usue	Describe the property that secures th	e claim:	\$163,996.47	\$171,417.00	\$0.00
Creditor's Name	gage	301 Appling Lane Bolingbroo		ψ103,330.47	Ψ171, 417.00	Ψ0.00
		60440 Will County	JK, IL			
		Jointly owned with ex-spous	e			
		Currently maintained as a re				
39 College	Street	property				
P.O. Box 24		As of the date you file, the claim is: Cl	heck all that			
Greenville,		apply. □ Contingent				
	City, State & Zip Code	☐ Unliquidated				
	у, тапа а др оббо	☐ Disputed				
Who owes the deb	t? Check one.	Nature of lien. Check all that apply.				
☐ Debtor 1 only		☐ An agreement you made (such as m	ortgage or secu	red		
Debtor 2 only		car loan)	J. 19490 01 3004			
Debtor 1 and Debt	tor 2 only	☐ Statutory lien (such as tax lien, mech	nanic's lien)			

☐ Judgment lien from a lawsuit

At least one of the debtors and another

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Debtor 1	Brent Leo	nard Herter		Cas	e number (if know)	
	First Name	Middle Name	Last Name		_	
	if this claim re nunity debt	lates to a	Other (including a right to offset)	Mortgage	_	
Date debt	was incurred	10/31/2011	Last 4 digits of account number	0436		
A -1 -1 4b -	deller velve ef	very entries in Column	A an this was Milita that wombar	hava.	\$182,989.40	
		•	A on this page. Write that number	nere:	\$102,969.40	
	the last page o at number here		lar value totals from all pages.		\$182,989.40	
Part 2:	List Others t	o Be Notified for a De	ebt That You Already Listed			
to collect	from you for a	debt you owe to someor bts that you listed in Pa	ne else, list the creditor in Part 1, a	nd then list the c	ollection agency here. Simi	ple, if a collection agency is trying ilarly, if you have more than one be notified for any debts in Part 1,
Na Na	ame Address	3				
-N	ONE-		On	which line in	Part 1 did you enter	the creditor?
			Las	t 4 digits of a	account number	

	Do any creditors have nonpriority unsecu	-			
	LI No. You have nothing to report in this par	t. Submit this form to the court with your othe	r schedules.		
	Yes.				
	Yes.				
4.	List all of your nonpriority unsecured clai	ms in the alphabetical order of the creditor			
4.	List all of your nonpriority unsecured clai unsecured claim, list the creditor separately than one creditor holds a particular claim, list	ms in the alphabetical order of the creditor or each claim. For each claim listed, identify the other creditors in Part 3.lf you have more	what type of claim it is. Do not list claims a	already included in F	Part 1. If more
4.	List all of your nonpriority unsecured clai unsecured claim, list the creditor separately to	or each claim. For each claim listed, identify	what type of claim it is. Do not list claims a	already included in F fill out the Continua	Part 1. If more tion Page of
4.	List all of your nonpriority unsecured clai unsecured claim, list the creditor separately lithan one creditor holds a particular claim, list Part 2.	or each claim. For each claim listed, identify	what type of claim it is. Do not list claims a	already included in F	Part 1. If more tion Page of
4.	List all of your nonpriority unsecured clai unsecured claim, list the creditor separately than one creditor holds a particular claim, list Part 2. Advocate Good Shepherd	or each claim. For each claim listed, identify	what type of claim it is. Do not list claims a	already included in F fill out the Continua	Part 1. If more tion Page of
4.	List all of your nonpriority unsecured clai unsecured claim, list the creditor separately than one creditor holds a particular claim, list Part 2. Advocate Good Shepherd Hospital Priority Creditor's Name	or each claim. For each claim listed, identify the other creditors in Part 3.lf you have more Last 4 digits of account number	what type of claim it is. Do not list claims a than three nonpriority unsecured claims 8669	already included in F fill out the Continua Total cla	Part 1. If more tion Page of
4.	List all of your nonpriority unsecured clai unsecured claim, list the creditor separately than one creditor holds a particular claim, list Part 2. Advocate Good Shepherd Hospital Priority Creditor's Name PO Box 3039	or each claim. For each claim listed, identify the other creditors in Part 3.lf you have more	what type of claim it is. Do not list claims a than three nonpriority unsecured claims	already included in F fill out the Continua Total cla	Part 1. If more tion Page of
4.	List all of your nonpriority unsecured clai unsecured claim, list the creditor separately than one creditor holds a particular claim, list Part 2. Advocate Good Shepherd Hospital Priority Creditor's Name	or each claim. For each claim listed, identify the other creditors in Part 3.lf you have more Last 4 digits of account number	what type of claim it is. Do not list claims a than three nonpriority unsecured claims 8669 2015	already included in F fill out the Continua Total cla	Part 1. If more tion Page of
4.	List all of your nonpriority unsecured clai unsecured claim, list the creditor separately than one creditor holds a particular claim, list Part 2. Advocate Good Shepherd Hospital Priority Creditor's Name PO Box 3039 Oak Brook, IL 60522-3039 Number Street City State Zlp Code	cor each claim. For each claim listed, identify the other creditors in Part 3.lf you have more Last 4 digits of account number When was the debt incurred? As of the date you file, the claim	what type of claim it is. Do not list claims a than three nonpriority unsecured claims 8669 2015	already included in F fill out the Continua Total cla	Part 1. If more tion Page of
4.	List all of your nonpriority unsecured claiunsecured claim, list the creditor separately than one creditor holds a particular claim, list Part 2. Advocate Good Shepherd Hospital Priority Creditor's Name PO Box 3039 Oak Brook, IL 60522-3039 Number Street City State Zlp Code Who incurred the debt? Check one.	or each claim. For each claim listed, identify the other creditors in Part 3.lf you have more Last 4 digits of account number When was the debt incurred?	what type of claim it is. Do not list claims a than three nonpriority unsecured claims 8669 2015	already included in F fill out the Continua Total cla	Part 1. If more tion Page of
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4.	List all of your nonpriority unsecured claiunsecured claim, list the creditor separately than one creditor holds a particular claim, list Part 2. Advocate Good Shepherd Hospital Priority Creditor's Name PO Box 3039 Oak Brook, IL 60522-3039 Number Street City State Zlp Code Who incurred the debt? Check one.	cor each claim. For each claim listed, identify the other creditors in Part 3.lf you have more Last 4 digits of account number When was the debt incurred? As of the date you file, the claim	what type of claim it is. Do not list claims a than three nonpriority unsecured claims 8669 2015	already included in F fill out the Continua Total cla	Part 1. If more tion Page of
4.	List all of your nonpriority unsecured claiunsecured claim, list the creditor separately than one creditor holds a particular claim, list Part 2. Advocate Good Shepherd Hospital Priority Creditor's Name PO Box 3039 Oak Brook, IL 60522-3039 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only	or each claim. For each claim listed, identify the other creditors in Part 3.lf you have more Last 4 digits of account number When was the debt incurred? As of the date you file, the claim in Contingent	what type of claim it is. Do not list claims a than three nonpriority unsecured claims 8669 2015	already included in F fill out the Continua Total cla	Part 1. If more tion Page of
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4.	List all of your nonpriority unsecured claiunsecured claim, list the creditor separately than one creditor holds a particular claim, list Part 2. Advocate Good Shepherd Hospital Priority Creditor's Name PO Box 3039 Oak Brook, IL 60522-3039 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is Contingent Unliquidated Disputed Type of NONPRIORITY unsecuree	what type of claim it is. Do not list claims a than three nonpriority unsecured claims 8669 2015 s: Check all that apply	already included in F fill out the Continua Total cla	Part 1. If more tion Page of
4.	List all of your nonpriority unsecured claiunsecured claim, list the creditor separately than one creditor holds a particular claim, list Part 2. Advocate Good Shepherd Hospital Priority Creditor's Name PO Box 3039 Oak Brook, IL 60522-3039 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is Contingent Unliquidated Disputed Type of NONPRIORITY unsecuree	what type of claim it is. Do not list claims a than three nonpriority unsecured claims 8669 2015 s: Check all that apply	already included in F fill out the Continua Total cla	Part 1. If more tion Page of
4.	List all of your nonpriority unsecured claiunsecured claim, list the creditor separately than one creditor holds a particular claim, list Part 2. Advocate Good Shepherd Hospital Priority Creditor's Name PO Box 3039 Oak Brook, IL 60522-3039 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a communication.	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a separate	what type of claim it is. Do not list claims a than three nonpriority unsecured claims 8669 2015 s: Check all that apply	already included in F fill out the Continua Total cla	Part 1. If more tion Page of
4.	List all of your nonpriority unsecured claiunsecured claim, list the creditor separately than one creditor holds a particular claim, list Part 2. Advocate Good Shepherd Hospital Priority Creditor's Name PO Box 3039 Oak Brook, IL 60522-3039 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a communicate the claim subject to offset?	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a sepanot report as priority claims	what type of claim it is. Do not list claims a than three nonpriority unsecured claims 8669 2015 s: Check all that apply d claim:	already included in F fill out the Continua Total cla	Part 1. If more tion Page of
4.	List all of your nonpriority unsecured clai unsecured claim, list the creditor separately than one creditor holds a particular claim, list Part 2. Advocate Good Shepherd Hospital Priority Creditor's Name PO Box 3039 Oak Brook, IL 60522-3039 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a communicebt	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a separate	what type of claim it is. Do not list claims a than three nonpriority unsecured claims 8669 2015 s: Check all that apply d claim:	already included in F fill out the Continua Total cla	Part 1. If more tion Page of
4.	List all of your nonpriority unsecured claiunsecured claim, list the creditor separately than one creditor holds a particular claim, list Part 2. Advocate Good Shepherd Hospital Priority Creditor's Name PO Box 3039 Oak Brook, IL 60522-3039 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a communicate the claim subject to offset?	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a separate report as priority claims Debts to pension or profit-sharing	what type of claim it is. Do not list claims a than three nonpriority unsecured claims 8669 2015 s: Check all that apply d claim:	already included in F fill out the Continua Total cla	Part 1. If more tion Page of
4.	List all of your nonpriority unsecured clai unsecured claim, list the creditor separately than one creditor holds a particular claim, list Part 2. Advocate Good Shepherd Hospital Priority Creditor's Name PO Box 3039 Oak Brook, IL 60522-3039 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a communidebt Is the claim subject to offset?	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a sepanot report as priority claims Debts to pension or profit-sharing	what type of claim it is. Do not list claims a than three nonpriority unsecured claims 8669 2015 s: Check all that apply d claim: aration agreement or divorce that you did g plans, and other similar debts	already included in F fill out the Continua Total cla	Part 1. If more tion Page of

As of the date you file, the claim is: Check all that apply

Number Street City State Zlp Code

Debtor	1 Brent Leonard Herter	Document Page 21 of 55 Case number (if know)		
	Who incurred the debt? Check one.	□ Contingent		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts		
	Yes	■ Other. Specify Insurance		
4.3	American Express	Last 4 digits of account number 1008	\$	1,850.98
	Priority Creditor's Name P.O. Box 981535	When was the debt incurred? 2013		
	El Paso, TX 79998-1535	when was the dept incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent		
	Debtor 1 only	•		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did		
	is the dain subject to disect			
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts		
	Yes	■ Other. Specify Credit Card Purchases		
4.4	Capital One	Last 4 digits of account number 2459	\$	1,537.95
	Priority Creditor's Name	Last 4 digits of account number	Ψ	1,007.00
	P.O. Box 30285 Salt Lake City, UT 84130	When was the debt incurred? 2000		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent		
	Debtor 1 only			
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts		
	Yes	■ Other. Specify Credit Card Purchases		
4.5	Chase	Last 4 digits of account number 9673	\$	4,267.09
	Priority Creditor's Name P.O. Box 15153 Wilmington, DE 19886	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		

Official Form 106 E/F

Debto	or 1 Brent Leonard Herter	Document Page	22 of 55 Case number (if know)		
	Who incurred the debt? Check one.	☐ Contingent			
	■ Debtor 1 only	L Conungent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community debt	☐ Student loans			
	Is the claim subject to offset?	☐ Obligations arising out of a sepanot report as priority claims	ration agreement or divorce that you did		
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts		
	Yes	■ Other. Specify Credit	Card Purchases		
4.6	Citi Cards	Last 4 digits of account number	2915	\$	3,357.49
	Priority Creditor's Name PO Box 78045	When was the debt incurred?			
	Phoenix, AZ 85062-8045 Number Street City State Zlp Code	As of the date you file, the claim i	e: Chock all that apply		
	Who incurred the debt? Check one.	_	s. Oneok all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa	ration agreement or divorce that you did		
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts		
	Yes	Other. Specify Credit	Card Purchases		
4.7	Discover	Last 4 digits of account number	2042	\$	6,801.93
	Priority Creditor's Name PO Box 30421	When was the debt incurred?	2000	·	
	Salt Lake City, UT 84130-0421	when was the dept incurred?	2000		
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent			
	■ Debtor 1 only □ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Полет			
	io ino ordini odbject to onoct.	not report as priority claims	ration agreement or divorce that you did		
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts		
	Yes	■ Other. Specify Credit	Card Purchases		
4.8	Douglas Smith	Last 4 digits of account number	D619	\$	1,345.28
	Priority Creditor's Name Attorney at Law 2021 Midwest Rd, Ste 200 Oak Brook, IL 60523	When was the debt incurred?	2013		
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply		

Official Form 106 E/F

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Desc Main Page 23 of 55 Document Case number (if know) Debtor 1 Brent Leonard Herter Who incurred the debt? Check one. □ Contingent ■ Debtor 1 only Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans Is the claim subject to offset? Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Attorney Fees** Other. Specify 4.9 50.00 **DuPage Medical Group** 5823 Last 4 digits of account number \$ Priority Creditor's Name 15921 Collections Center Dr. When was the debt incurred? Chicago, IL 60693 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans debt Is the claim subject to offset? \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Medical Care** Other. Specify 4.10 Fitness 19 26.00 Last 4 digits of account number Priority Creditor's Name 189 Randall Road When was the debt incurred? Algonquin, IL 60102 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. □ Contingent Debtor 1 only Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans debt Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Other- Membership Dues** Other. Specify

4.11 Merrick Bank

Last 4 digits of account number

\$

3,536.39

Priority Creditor's Name PO Box 660702

When was the debt incurred?

2000

Dallas, TX 75266-0702 Number Street City State Zlp Code

As of the date you file, the claim is: Check all that apply

2469

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4.14 **US Bank** Last 4 digits of account number 0441

Priority Creditor's Name PO BOx 790288

Saint Louis, MO 63179-0288

Number Street City State Zlp Code

558.60 \$

When was the debt incurred?

2015

As of the date you file, the claim is: Check all that apply

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from Part 1

6a. Domestic support obligations
6a. \$ 0.00

6b. Taxes and certain other debts you owe the government
6c. Claims for death or personal injury while you were intoxicated
6c. \$ 0.00

6d. Other. Add all other priority unsecured claims. Write that amount here.
6d. \$ 0.00

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Debtor 1 Brent Leonard Herter

	6e.	Total. Add lines 6a through 6d.	6e.	\$	0.00
				Total Claim	
	6f.	Student loans	6f.	\$	9,425.55
Total claims					<u> </u>
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	32,924.69
	6j.	Total. Add lines 6f through 6i.	6j.	\$	42,350.24

		17/1/11/11	3.0 1 14.4. 7 7 101 : 7:7	
Fill in this infor	mation to identify your	case:		
Debtor 1	Brent Leonard He	erter		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1	Jason & Sarah Ray 301 Appling Lane Bolingbrook, IL 60440	12 month residential real estate lease ending 02/28/2016
2.2	Verizon 777 Big Timber Road Elgin, IL 60123	2 year cell phone contract beginning 09/22/2014

		Document	Page 28 of	55	
Fill in this	information to identify your	case:			
Debtor 1	Brent Leonard Ho				
Dobtor 2	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	ng) First Name	Middle Name	Last Name		
United Sta	tes Bankruptcy Court for the:	NORTHERN DISTRICT OF	ILLINOIS		
Case num	ber				
(if known)					Check if this is an amended filing
Officia	l Form 106H				
Sched	lule H: Your Cod	ebtors			12/15
people are fill it out, a your name	filing together, both are equ	ally responsible for supplyi boxes on the left. Attach th Answer every question.	ng correct information e Additional Page to	on. If more space is r this page. On the to	rate as possible. If two married needed, copy the Additional Page, op of any Additional Pages, write
_	, ou u, oouez.e. (you are ming a joint case, as i	not not ounor opouco d	o a codobion	
□ No ■ Yes	5				
	hin the last 8 years, have you a, California, Idaho, Louisiana				ty states and territories include)
`	Go to line 3. B. Did your spouse, former spo	use, or legal equivalent live wi	ith you at the time?		
		, ,	•		
in line Form	2 again as a codebtor only	if that person is a guarantor	or cosigner. Make si	ure you have listed t	ng with you. List the person shown the creditor on Schedule D (Official , Schedule E/F, or Schedule G to
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
2	Nancy Herter 2018 Prentiss Dr. #204H Downers Grove, IL 60516			☐ Schedule D, lii ☐ Schedule E/F, ☐ Schedule G _ BB&T Mortgage	, line

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Fill	in this information to identify your	case:					
Del	btor 1 Brent Leon	ard Herter					
	btor 2 buse, if filing)						
Uni	ited States Bankruptcy Court for th	e: NORTHERN DISTRIC	CT OF ILI	LINOIS			
	se number nown)		-				d filing ent showing postpetition chapter as of the following date:
0	fficial Form 106I				Ī	MM / DD/ Y	YYY
S	chedule I: Your Inc	ome					12/15
atta Pa	use. If you are separated and yo ch a separate sheet to this form 1: Describe Employment	. On the top of any additi					
1.	Fill in your employment information.		Debto	r 1		Debtor 2	or non-filing spouse
	If you have more than one job, attach a separate page with information about additional			■ Employed		☐ Emplo	•
		,	☐ Not employed			☐ Not er	nployed
	employers. Include part-time, seasonal, or	Occupation	Chica Mana	goland Retention ger			
	self-employed work.	Employer's name	Maho	ney Environmental			
	Occupation may include student or homemaker, if it applies.	Employer's address		ssington Road , IL 60435			
		How long employed t	here?	2 years			
Pa	rt 2: Give Details About Mo	onthly Income					
	mate monthly income as of the use unless you are separated.	date you file this form. If	you have	nothing to report for any	line, wri	te \$0 in the	space. Include your non-filing
	ou or your non-filing spouse have n e space, attach a separate sheet t		ombine th	ne information for all emp	loyers fo	r that perso	on on the lines below. If you need
					For De	btor 1	For Debtor 2 or non-filing spouse
2.	List monthly gross wages, saldeductions). If not paid monthly				4	,166.67	\$ N/A

Official Form 106I Schedule I: Your Income page 1

0.00

4,166.67

3.

+\$

N/A

N/A

Estimate and list monthly overtime pay.

Calculate gross Income. Add line 2 + line 3.

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Deb	tor 1	Brent Leonard Herter		C	Case	number (<i>if kn</i> ov	vn)				
					For	Debtor 1			ebtor	2 or pouse	
	Cop	by line 4 here	4.		\$	4,166.	67	\$		N/A	_
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a	١.	\$	840.0	67	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b).	\$_		00	\$		N/A	_
	5c.	Voluntary contributions for retirement plans	5c	: .	\$_	333.	34	\$		N/A	_
	5d.	Required repayments of retirement fund loans	5d		\$_		00	\$		N/A	_
	5e.	Insurance	5e		\$_	276.	_	\$		N/A	_
	5f.	Domestic support obligations	5f.		\$_	0.0		\$		N/A	_
	5g. 5h.	Union dues Other deductions. Specify: Std	5g 5h		\$_ \$	0.0 33.		+ \$		N/A N/A	_
_			_		· —			· · ·			-
6.		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	1,483.		\$		N/A	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	2,683.	15	\$		N/A	_
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total									
		monthly net income.	8a		\$		14	\$		N/A	_
	8b.	Interest and dividends	8b).	\$_	0.0	00	\$		N/A	_
	8c. 8d.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation	8c 8d		\$_ \$	0.0	00 00	\$		N/A N/A	_
	8e.	Social Security	8e		<u>*</u> —		00	\$		N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.		\$	0.1		\$		N/A	_
	8g. 8h.	Pension or retirement income Other monthly income. Specify:	8g 8h		\$ \$	0.0		+ \$		N/A N/A	_
	OH.	Other monthly income. Specify:	_ 011	i. -	Ψ <u> </u>	U.(ΤΨ		IN/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	<u> </u>	8.	14	\$		N/A	4
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		2,691.29 +	- \$		N/A	= \$	2,691.29
		I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		Ť-		-,551125	* -				2,001120
11.	Star Incliothe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not ecify:	dep			•			chedule 11.		0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The restree that amount on the Summary of Schedules and Statistical Summary of Certallies							12.	\$	2,691.29
13.	Do	you expect an increase or decrease within the year after you file this form	?							Combine month!	ned ly income
		No.									

Official Form 106I Schedule I: Your Income page 2

Fill in this inform	nation to identify your	case:				
Debtor 1	Brent Leonard	Herter		Check	c if this is:	
Debtor 2				_	An amended filing	wing postpetition chapter
(Spouse, if filing)						the following date:
United States Ban	kruptcy Court for the:	NORTHERN DISTRICT OF ILLIN	OIS	<u> </u>	MM / DD / YYYY	
Case number						
(If known)						
Official F	orm 106J					
Schedule	e J: Your Ex	Kpenses				12/1
Be as complete information. If	e and accurate as po	essible. If two married people and attach another sheet to this				
Part 1: Des	cribe Your Househol	d				
■ No. Go						
		separate household?				
	No	•				
	Yes. Debtor 2 must fil	e Official Form 106J-2, Expenses	s for Separate House	ehold of Debt	or 2.	
2. Do you ha	ve dependents?	l No				
Do not list and Debtor	Debtor 1	Yes. Fill out this information for each dependent	Dependent's relation		Dependent's age	Does dependent live with you?
Do not stat	te the					□ No
dependent	s names.		Daughter		4	■ Yes
						□ No
						□ Yes □ No
						☐ Yes
						□ No
						☐ Yes
expenses	xpenses include of people other than nd your dependents					
	mate Your Ongoing		rau ara waina thia f		anlament in a Ch	antar 12 agas ta renert
	f a date after the ban	bankruptcy filing date unless y kruptcy is filed. If this is a supp				
Include expens	ses paid for with non	n-cash government assistance i ave included it on <i>Schedule I:</i> \	if you know			
(Official Form		ave included it on <i>deficultie</i> i.	rour moome		Your expe	enses
	or home ownership and any rent for the gi	expenses for your residence. I round or lot.	nclude first mortgag	e 4. \$		200.00
If not inclu	uded in line 4:					
4a. Rea	l estate taxes			4a. \$		0.00
	perty, homeowner's, o	r renter's insurance		4b. \$		0.00
		r, and upkeep expenses		4c. \$		0.00
		or condominium dues		4d. \$		0.00
Additional	I mortgage payments	s for your residence, such as ho	me equity loans	5. \$		0.00

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Debtor 1 Brent Leonard He	rter	Case numl	ber (if known)	
6. Utilities:				
6a. Electricity, heat, natu	ral gas	6a.	\$	0.00
6b. Water, sewer, garbag	ge collection	6b.	·	0.00
6c. Telephone, cell phon	e, Internet, satellite, and cable services	6c.	\$	103.73
6d. Other. Specify:		6d.	\$	0.00
Food and housekeeping s	supplies	7.	\$	250.00
Childcare and children's	education costs	8.	\$	450.00
. Clothing, laundry, and dry	cleaning	9.	\$	75.00
0. Personal care products a	nd services	10.	\$	100.00
1. Medical and dental expen	ses	11.	\$	100.00
2. Transportation. Include ga	s, maintenance, bus or train fare.			
Do not include car payment		12.	\$	405.00
Entertainment, clubs, rec	eation, newspapers, magazines, and books	13.	\$	100.00
4. Charitable contributions a	and religious donations	14.	\$	0.00
5. Insurance.				
	educted from your pay or included in lines 4 or 20.			
15a. Life insurance		15a.	\$	55.00
15b. Health insurance		15b.	\$	0.00
15c. Vehicle insurance		15c.	\$	122.00
15d. Other insurance. Spe	pify:	15d.	\$	0.00
Specify:	s deducted from your pay or included in lines 4 or 20.	16.	\$	0.00
Installment or lease paym				
17a. Car payments for Ve		17a.	\$	457.79
17b. Car payments for Ve	nicle 2	17b.	\$	0.00
17c. Other. Specify:		17c.	\$	0.00
17d. Other. Specify:		17d.	\$	0.00
	, maintenance, and support that you did not report and line 5, Schedule I. Your Income (Official Form 106I		\$	540.00
	to support others who do not live with you.	.,.	\$	0.00
Specify:	to support since as not me min you.	19.	<u> </u>	0.00
	ses not included in lines 4 or 5 of this form or on Sc		our Income.	
20a. Mortgages on other p		20a.		0.00
20b. Real estate taxes		20b.	· -	0.00
20c. Property, homeowne	's or renter's insurance	20c.		0.00
20d. Maintenance, repair,	·	20d.	·	0.00
20e. Homeowner's associ		20e.	•	0.00
			·	
	t loan repayment	21.		88.00
wiscellaneous (tax pre	paration, banking, gifts)		+\$	75.00
2. Calculate your monthly ex	penses			
22a. Add lines 4 through 21			\$	3,121.52
	expenses for Debtor 2), if any, from Official Form 106J-2	2	\$	-,
, , , ,	The result is your monthly expenses.		\$	3,121.52
ZZO. Mud IIIIG ZZa aliu ZZD.	The result is your monthly expenses.		Ψ	3,121.32
3. Calculate your monthly no	et income.			
23a. Copy line 12 (your co	mbined monthly income) from Schedule I.	23a.	\$	2,691.29
23b. Copy your monthly e	openses from line 22c above.	23b.	-\$	3,121.52
, ,	•			-,
23c. Subtract your monthl	y expenses from your monthly income.			400.00
The result is your mo	nthly net income.	23c.	\$	-430.23
	e or decrease in your expenses within the year after nish paying for your car loan within the year or do you expect you mortgage?			e or decrease because of a
- 110.				
☐ Yes. Explain he	ere.			

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Debtor 1	Brent Leonard He	rtor		
Debior 1	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number (if known)				☐ Check if this is an amended filing
Declara	tion About a	n individual	Debtor's Schedu	12/15
If two married n	eonle are filing together	hoth are equally respo	nsible for supplying correct info	rmation
·			nsible for supplying correct info	
You must file th	is form whenever you fi	le bankruptcy schedules	s or amended schedules. Making	rmation. a false statement, concealing property, or p to \$250,000, or imprisonment for up to 20
You must file th obtaining mone years, or both.	nis form whenever you fi by or property by fraud ir	le bankruptcy schedules	s or amended schedules. Making	a false statement, concealing property, or
You must file the obtaining mone years, or both.	nis form whenever you fi ey or property by fraud ir 18 U.S.C. §§ 152, 1341, 1	le bankruptcy schedules n connection with a band 519, and 3571.	s or amended schedules. Making	a false statement, concealing property, or p to \$250,000, or imprisonment for up to 20
You must file the obtaining mone years, or both.	nis form whenever you fi ey or property by fraud ir 18 U.S.C. §§ 152, 1341, 1	le bankruptcy schedules n connection with a band 519, and 3571.	s or amended schedules. Making kruptcy case can result in fines u	a false statement, concealing property, or p to \$250,000, or imprisonment for up to 20

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and

and Signature (Official Form 119).

Signature of Debtor 2

Date

that they are true and correct. X /s/ Brent Leonard Herter

> **Brent Leonard Herter** Signature of Debtor 1

Date December 30, 2015

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Fill	l in this inform	nation to identify you	ır case:						
De	ebtor 1	Brent Leonard H	Herter Middle N	Nama		Last Name			
De	btor 2	riisi Name	Wildale I	varrie		Last Name			
(Sp	ouse if, filing)	First Name	Middle N	Name		Last Name			
Un	ited States Bar	nkruptcy Court for the	NORTHER	N DISTRICT O	F ILLIN	NOIS			
Ca	se number								
(if k	nown)			_				_	heck if this is an
								an	nended filing
\sim	æ: -! - l □	407							
	fficial For					(D			
		of Financial							12/1
		nd accurate as poss ore space is needed							
		n). Answer every que					,	,	
Pa	rt 1: Give D	etails About Your M	arital Status ar	nd Where You	Lived	Before			
1.	What is your	current marital state	us?						
	☐ Married								
	■ Not mari	ried							
•			Parada and and						
2.	During the ia	ast 3 years, have you	lived anywne	re otner than v	wnere	you live now?			
	□ No								
	Yes. List	t all of the places you	lived in the last	3 years. Do no	ot inclu	de where you live no	W.		
	Debtor 1 Pri	ior Address:		ates Debtor 1 red there		Debtor 2 Prior Ad	ldress:		Dates Debtor 2 lived there
	492 Plante Flavery Bra	•		om-To: 5 /2013 - 05/20)14	☐ Same as Debtor	1		☐ Same as Debtor 1 From-To:
	2130 Wate			om-To:		☐ Same as Debtor	1		☐ Same as Debtor 1
	Woodridge	e, IL	80	3/2012 - 05/20)13				From-To:
3.	Within the la	ıst 8 years, did you e	ver live with a	spouse or leg	ıal equ	ivalent in a commu	nity property state	or territory	/? (Community propert
stat	tes and territori	es include Arizona, Ca	alifornia, Idaho,	Louisiana, Nev	/ada, N	lew Mexico, Puerto R	Rico, Texas, Washing	gton and W	/isconsin.)
	No								
	☐ Yes. Ma	ke sure you fill out So	hedule H: Your	· Codebtors (Off	ficial F	orm 106H).			
Pa	rt 2 Explain	n the Sources of You	ır Income						
4.	Fill in the tota	e any income from end all amount of income you go a joint case and you	ou received fror	m all jobs and a	all busir	nesses, including par	t-time activities.	ious caler	ndar years?
	□ No								
	_	in the details.							
			Debtor 1				Debtor 2		
			Sources of in	ncome	Gros	ss income	Sources of incor	me	Gross income
			Check all that		(befo	ore deductions and usions)	Check all that app		(before deductions and exclusions)

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Case number (# known) Document

Debtor 1 Brent Leonard Herter

		Debto			Debtor 2						
			es of income all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)					
From January 1 of current year until the date you filed for bankruptcy:		- VV	ages, commissions, es, tips	\$50,255.04	☐ Wages, commission bonuses, tips	ons,					
		□Ор	erating a business		☐ Operating a busine	ss					
For last calendar year: (January 1 to December 31, 2014)		0141	■ Wages, commissions, bonuses, tips \$49,600.00		☐ Wages, commissions, bonuses, tips						
		□Ор	erating a business		☐ Operating a busine	ss					
	endar year before to December 31, 2	013 \	ages, commissions, es, tips	\$43,189.00	☐ Wages, commission bonuses, tips	ons,					
		□Ор	erating a business		☐ Operating a busine	ss					
□ No	9		·	ately. Do not include income t	nat you listed in line 4. Debtor 2						
		Source	es of income be below	Gross income (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)					
For last calendar year: (January 1 to December 31, 2014)		Unem	ployment	\$611.00							
For the calendar year before that: (January 1 to December 31, 2013)			ployment	\$14,718.00							
Part 3: Li	ist Certain Payme	nts You Made E	Before You Filed for	Bankruptcy							
6. Are eith	Are either Debtor 1's or Debtor 2's debts primarily consumer debts?										
		ays before you f	iled for bankruptcy, di	id you pay any creditor a total	of \$6,225* or more?						
		to line 7.									
	pai	d that creditor. D		id a total of \$6,225* or more ints for domestic support oblights bankruptcy case.							
	* Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.										
■ Yes	Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?										
	□ No. Go	to line 7.									
	■ Yes Lisi	lude payments fo		id a total of \$600 or more and bligations, such as child supp							
Credito	or's Name and Add	dress	Dates of payme	nt Total amount	Amount you Was	this payment for					

still owe

paid

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Debtor 1 Brent Leonard Herter

	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for							
	BB&T Mortgage 39 College Street P.O. Box 2467 Greenville, SC 29602	October 2015 November 2015	\$3,048.72	\$163,996.47	■ Mortgag □ Car □ Credit C □ Loan Re □ Supplier □ Other	ard						
	Ally Financial P.O. Box 380902 Bloomington, MN 55438-0902	October 2015 November 2015 December 2015	\$1,373.37	\$18,992.93	☐ Mortgag ☐ Car ☐ Credit Ci ☐ Loan Re ☐ Supplier: ☐ Other	ard						
7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.											
	☐ Yes. List all payments to an insider											
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment						
	insider? Include payments on debts guaranteed or cos ■ No □ Yes. List all payments to an insider Insider's Name and Address	signed by an insider. Dates of payment	Total amount	Amount you	Reason for	this payment						
	morasi o manio ana 7 marioso	Dates of paymont	paid	still owe	Include cred							
Par	t 4: Identify Legal Actions, Repossession	ns, and Foreclosures										
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.											
	Case title	Nature of the case	Court or agency		Status of the case							
	In Re: The Marriage of Brent L. Herter and Nancy I. Herter 2013 D 619	Divorce	Circuit Court of the 18th Judicial Dist DuPage County, IL		☐ Pending ☐ On appeal ■ Concluded							
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details belo		erty repossessed,	foreclosed, garni	ished, attache	d, seized, or levied?						
	■ No □ Yes. Fill in the information below.											
	Creditor Name and Address	Describe the Property		Date	•	Value of the						

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Case number (if known) Debtor 1 **Brent Leonard Herter** 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No ☐ Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Value Dates you gave per person the gifts Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Nο Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. **Person Who Was Paid** Description and value of any property Amount of Date payment Address transferred or transfer was payment

\$1500.00 attorney fees

\$335.00 filing fee

Person Who Made the Payment, if Not You

Email or website address

2413 W. Algonquin Rd. #154

Aiken & Aiken, LLC

Algonquin, IL 60102

\$1,500.00

made

07/2015 -

12/2015

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Debtor 1 Brent Leonard Herter Document Page 38 of 55 Case number (if known)

	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	transferred	value of any prop	erty	Date payment or transfer was made	Amount of payment			
	Debtorcc.org 372 Summit Ave Jersey City, NJ 07306	Credit counsel	ing course		12/30/2015	\$14.95			
17.	Within 1 year before you filed for bankruptc promised to help you deal with your credito Do not include any payment or transfer that yo	rs or to make payment			or transfer any prope	erty to anyone who			
	■ No □ Yes. Fill in the details.								
	Person Who Was Paid Address	Description and transferred	value of any prop	erty	Date payment or transfer was made	Amount of payment			
	Within 2 years before you filed for bankrupt transferred in the ordinary course of your b Include both outright transfers and transfers minclude gifts and transfers that you have alread No Yes. Fill in the details.	usiness or financial aft ade as security (such as	fairs? the granting of a s						
	Person Who Received Transfer Address	Description and property transfer			any property or received or debts change	Date transfer was made			
19.	Person's relationship to you Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details.								
	Name of trust	Description and	value of the propo	erty transferr	ea	Date Transfer was made			
Par	t 8: List of Certain Financial Accounts, Ins	struments, Safe Depos	it Boxes, and Sto	rage Units					
20.	Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, ohouses, pension funds, cooperatives, assoc □ No □ Yes. Fill in the details.	or other financial accou	unts; certificates	of deposit; s					
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account instrument	clo	te account was osed, sold, oved, or nsferred	Last balance before closing or transfer			
	US Bank P.O. Box 790408 Saint Louis, MO 63179-0408	XXXX-0441	■ Checking □ Savings □ Money Marke □ Brokerage □ Other		/21/2015	\$558.60			

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Debtor 1 Brent Leonard Herter

21.	Do you now have, or did you have within 1 ye cash, or other valuables?	ear before you filed for bankruptcy, a	ny safe deposit box or other deposito	ry for securities,
	No			
	Yes. Fill in the details.		5	5 (11)
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
22.	Have you stored property in a storage unit or	place other than your home within 1	year before you filed for bankruptcy	
	■ No			
	Yes. Fill in the details.			
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
Par	rt 9: Identify Property You Hold or Control for	or Someone Else		
23.	Do you hold or control any property that som for someone.	neone else owns? Include any proper	ty you borrowed from, are storing for	, or hold in trust
	■ No			
	Yes. Fill in the details.			
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
Par	rt 10: Give Details About Environmental Info	rmation		
For	the purpose of Part 10, the following definitio	ns apply:		
	Environmental law means any federal, state, toxic substances, wastes, or material into the regulations controlling the cleanup of these	e air, land, soil, surface water, groun		
	Site means any location, facility, or property to own, operate, or utilize it, including dispose		law, whether you now own, operate, o	or utilize it or used
	Hazardous material means anything an envir hazardous material, pollutant, contaminant, o		s waste, hazardous substance, toxic s	substance,
Rep	oort all notices, releases, and proceedings that	t you know about, regardless of whe	n they occurred.	
24.	Has any governmental unit notified you that	you may be liable or potentially liable	under or in violation of an environme	ental law?
	No			
	☐ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of a	ny release of hazardous material?		
	■ No			
	Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and	Environmental law, if you know it	Date of notice
		ZIP Code)		

Case 15-43816 Doc 1 Filed 12/31/15 Entered 12/31/15 15:20:00 Document Page 40 of 55 **Brent Leonard Herter** Case number (if known) Debtor 1 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. No Yes. Fill in the details. **Case Title** Nature of the case Status of the Court or agency **Case Number** Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ■ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number** Address Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. **Date Issued** Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Brent Leonard Herter **Brent Leonard Herter** Signature of Debtor 2 Signature of Debtor 1 Date December 30, 2015 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes

Official Form 107

☐ Yes. Name of Person

. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

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	Di ciil Leonail	d Herter			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court for the	he: NORTHERN DISTRICT	OF ILLINOIS		
Case number _				_	.
(if known)					Check if this is an amended filing
					arrichaea ming
Official For	rm 108				

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

illionilation be			5:1 1:4
Identity the cre	ditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's Al	ly	■ Surrender the property.	■ No
name:		☐ Retain the property and redeem it.	
Description of	2012 Buick Regal 71,100 miles	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:		☐ Retain the property and [explain]:	-
Creditor's BI	B&T Mortgage	☐ Surrender the property.	■ No
name:		☐ Retain the property and redeem it.	
Description of	301 Appling Lane Bolingbrook,	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:	IL 60440 Will County Jointly owned with ex-spouse	■ Retain the property and [explain]:	
	Currently maintained as a rental property	Retain & Pay	_

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will the lease be assumed?

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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B8 (F	orm 8) (12/08)			Page 2
Les	sor's name:	Jason & Sarah R	ау	□ No
				■ Yes
	cription of leas	sed 12 month resider	ntial real estate lease ending 02/28/2016	
	<u> </u>			
Part	Sign Be	elow		
		perjury, I declare that I ha ubject to an unexpired le	ave indicated my intention about any property of my ease.	state that secures a debt and any personal
Χ	/s/ Brent L	eonard Herter	x	
		nard Herter	Signature of Debtor 2	
	Signature of	Debtor 1		
	Date De	ecember 30, 2015	Date	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Cha	pter 7:	Liquidation
	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

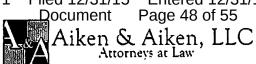
In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCreditAndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 15-43816 Doc 1 Filed 12/31/15 Entered 12/31/15 15:20:00 Desc Main Document Page 47 of 55

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In re	Brent Leonard Herter		Case N	0.	
		Debtor(s)	Chapte	7	
	DISCLOSURE OF COMPE	NSATION OF ATTO	RNEY FOR	DEBTOR(S)	
C	cursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2010 ompensation paid to me within one year before the filing e rendered on behalf of the debtor(s) in contemplation	ng of the petition in bankruptcy	, or agreed to be p	aid to me, for services re	
	For legal services, I have agreed to accept		\$	1,500.00	
	Prior to the filing of this statement I have received		\$	1,500.00	
	Balance Due		\$	0.00	
2. \$	335.00 of the filing fee has been paid.				
3. T	he source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4. T	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5. I	I have not agreed to share the above-disclosed comp	pensation with any other persor	unless they are m	embers and associates of	my law firm.
[☐ I have agreed to share the above-disclosed compens copy of the agreement, together with a list of the na				w firm. A
6. I	n return for the above-disclosed fee, I have agreed to re	ender legal service for all aspec	ts of the bankrupt	ey case, including:	
b c.	 Analysis of the debtor's financial situation, and rend Preparation and filing of any petition, schedules, sta Representation of the debtor at the meeting of credit [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and applications 522(f)(2)(A) for avoidance of liens on how 	tement of affairs and plan which ors and confirmation hearing, a reduce to market value; ex ons as needed; preparation	h may be required and any adjourned cemption planni	hearings thereof;	iling of
7. B	by agreement with the debtor(s), the above-disclosed fe Representation of the debtors in any di any other adversary proceeding.			nces, relief from stay	/ actions or
		CERTIFICATION			
	certify that the foregoing is a complete statement of an ankruptcy proceeding.	y agreement or arrangement for	r payment to me fo	or representation of the de	ebtor(s) in
De	ecember 30, 2015	/s/ Michele L. Ail	ken		
Do	ute	Michele L. Aiken			
		Signature of Attorn Aiken & Aiken, L			
		2413 W. Algonqu			
		Algonquin, IL 60 (847)245-2336 F		30	
		contact@aikena			
		Name of law firm			



This R	Representation Agreeme	ent ("Agreement") is entered ir	nto by and between <u>Brent</u>
14cs	Her -		("Client" or "you") and Aiken &
Aiken,	LLC ("Attorney" or "we	e"). You are retaining the fii ovide the legal services desc	rm Aiken & Aiken, LLC and not one cribed below on these terms:
1.		e the legal services described de the filing fee charged by th	

Attorney must obtain the credit report, the fee for the same is \$ 75.00-

basis there will be an additional charge of \$500.00.

The flat fee listed above is based on the facts as you have described them in our initial meeting. If the complexity of the issues regarding your situation was unclear or understated or, if after review of the questionnaire and your documentation, we determine that your case is more complex than expected or the questionnaire and/or documentation is substantially incomplete, then we are not bound by the flat fee mentioned above. You agree that we will not be obligated to file the case until we are satisfied that the information is substantially complete and any additional fees have been paid. You understand that your case must be filed within thirty (30) days of the first petition preparation by the Attorney or additional attorney fees may be charged. PLEASE BE ADVISED that if you want your case filed on an expedited or emergency

does it include the credit counseling fee or the financial management course fee, which must be paid directly to the counseling agency. A credit report is required and, if the

The retainer funds will be treated as an advance payment, allowing the Attorney to take the retainer into income immediately and the funds will NOT be placed in the Attorney's trust account. If for any reason, you decide not to file bankruptcy after retaining services but before the petition is filed, retainer funds paid as of the termination date shall be credited towards the services rendered through the termination date.

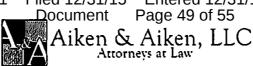
You may pay the fee in installment payments of no more than three (3) months, as detailed in the installment payment program agreement. All installment payments are due on the dates as specified in the agreement. We will have no obligation to file the petition until all of the fees are paid in full. Any fee paid less than seven (7) days before the filing of your petition must be paid in cash, cashier's check or money order. The legal services fee does not include any costs we incur on your behalf. PLEASE BE ADVISED that there is a \$50.00 service charge for all returned checks.

If, after an initial, detailed financial analysis is completed, it is not possible or desirable for the Client to file a Chapter 7 bankruptcy case and a Chapter 13 bankruptcy case must be filed, a new retainer agreement must be executed for a Chapter 13 case.

2. SCOPE OF REPRESENTATION.

<u>Included Services:</u> This agreement covers services rendered after our initial phone consultation, including the analysis of your financial condition, the types of bankruptcy available to you, the scope of the relief you may obtain under each type of bankruptcy filing, and, where a Chapter 7 filing is determined to be the most beneficial to you: the

Client's Initials:



preparation and filing of a petition and schedules and claims of exemptions with the bankruptcy court, preparation of the certificate of financial management course) attendance at the initial Section 341 meeting of creditors, and review of reaffirmation agreements for secured debts.

Services Not Included: When a Chapter 7 filing is determined to be the most beneficial to you, the flat fee provided in this agreement does not include our services in connection with: requests for production of documents by the Chapter 7 Trustee or any other party whenever requested; appearances at, or preparation for Rule 2004 examinations or reaffirmation agreement hearings; representation related to disputes or objections to claims of exemption; relief from stay; objections to discharge and dischargeability of debts; avoidance of liens; discharge and/or release of tax liens; governmental audits; request for turnover matters; amendments of any schedules (including the addition of creditors); appeal of any decision; re-opening a closed case (for any reason); nor any services after the closing of your case. We are not engaged to represent you in any litigation now pending or filed hereafter outside the bankruptcy court. Any representation for services not included in this agreement would require a separate retainer agreement and attorney fee.

PLEASE BE ADVISED that representation by the Attorney is limited solely and exclusively to your bankruptcy case and does not include any other legal matters of any nature, including but not limited to: foreclosure defense, home loan modification, debt negotiation, and judgment actions by creditors. If you desire representation in any other matter, a separate fee agreement must be executed.

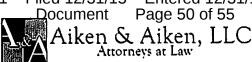
Billing Terms: With respect to representation for matters not covered by the flat fee or in the case of termination of representation prior to filing, the time spent on your matter will be billed at either: (i) \$250.00 per hour for attorneys; \$125 per hour for paralegal; and \$75 for legal assistant or (ii) a flat fee that is mutually agreed upon by Client and Attorney in writing. If either party withdraws from representation, all time and work spent on your case will be included in the bill. In many cases, this amount may exceed the amount of the flat fee (which is provided at a discounted rate). Regardless, you agree to pay the full amount of the invoice, including any balance due over what has already paid to date.

You agree to pay for any additional fees at the time we request payment, unless other arrangements have been agreed to by Client and Attorney in writing. You agree to pay our costs of collection, including reasonable attorneys' fees incurred in the course of collection, should you fail to pay as agreed.

3. COSTS. In addition to the flat fee described above, you also agree to pay all out-of-pocket costs incurred by Attorney in the course of this representation, including but not limited to: copying, postage, long distance telephone charges, fax charges, courier, overnight delivery, title reports, transportation costs including mileage and any other costs that are necessary in the opinion of the Attorney to accomplish the purposes of the representation. You will pay directly the costs of the pre-bankruptcy credit counseling and the post-filing financial management class that is required to receive a bankruptcy

Client's Initials: BL+

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discharge. If you do not complete this the post-financial management course in a timely manner, it is possible that your case will be closed without a discharge and you will have to petition the Court to have your case re-opened, incurring an additional court filing fee plus additional attorney fees.

- 4. ADDITIONAL/INCREASED ATTORNEY FEES. The flat fee listed above is based on the facts as you have described them in our initial consultation. Any of the following may trigger an increase in the fees in your case:
 - A delay of more than five (5) months between signing this Agreement and providing your fully completed questionnaire and requested documentation;
 - A delay of more than thirty (30) days between providing your completed questionnaire and documentation and the signing of your bankruptcy petition;
 - Failure to provide all of the requested information in a timely fashion;
 - Our determination that your case is more complex than originally thought;
 - Intervening events which change the issues, timing or players in your case;

In such an event, we will notify you that this paragraph applies and we will have no obligation to file your petition until any additional fees are paid.

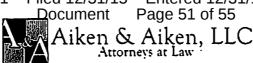
5. AMENDMENTS. Bankruptcy law requires that you file amended schedules if, within six (6) months of the bankruptcy filing, you acquire or become entitled to an inheritance, marital property settlement, life insurance or death benefit. You agree to contact us within seven (7) days of learning that you may be entitled to receive any of these kinds of property.

You are also required to file amended schedules if the originally filed schedules were incorrect or inaccurate in any way. You agree to contact us within seven (7) days of discovering that your original schedules were in any way inaccurate or incomplete.

- 6. COSTS FOR AMENDMENTS. You agree that in the event that documents filed with the court require amending due to your failure to provide adequate or necessary information, you will pay an additional flat legal fee of \$500.00 for amending your petition.
- 7. CONDITIONS. This Agreement will not take effect, and we will have no obligation to provide legal services, until this Agreement has been executed by both you and us and have paid the retainer as detailed above.
- 8. CLIENT RESPONSIBILITIES. The ultimate responsibility for the accuracy and completeness of the bankruptcy schedules and the list of creditors rests with you. Attorney will attempt to assist you in locating and listing your creditors and their current addresses but you sign the schedules under penalty of perjury and you agree to carefully review them prior to signing. Further, you understand that we will rely on the information supplied by you about your assets and liabilities to advise you. Failure to be both truthful and thorough my limit the relief you obtain by the bankruptcy filing. It is essential that you read carefully and respond timely to each and every communication from us. You understand that bankruptcy will remain on your credit reports for a period of

Client's Initials: BUH

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up to ten (10) years. You understand that upon the filing of the bankruptcy petition, all of your open credit card accounts, even those with a zero balance, will likely be closed by the credit grantor. You understand that bankruptcy law allows utility companies to require a deposit for continued service. You also acknowledge that it is NOT permissible to incur new unsecured debt after meeting with an attorney but before filing for bankruptcy. To incur new debt within ninety (90) days of filing for protection under Chapter 7 is presumed to be fraud and may result in a finding by the Court that that debt is not dischargeable.

You understand that upon filing a petition in bankruptcy, all of your property becomes property of the bankruptcy estate and, unless exempt, may be administered/sold by the trustee in order to benefit your creditors. Further, if you are operating a business, the trustee may demand that you cease operations of that business immediately while the bankruptcy case is pending. The trustee may sell any and all interests you may have in any business, if the interest is not exempt. You understand that you have a duty to cooperate with the trustee and there is no absolute right for you to dismiss your Chapter 7 bankruptcy case once it has been filed.

9. TERMINATION OF AGREEMENT. In the event that you are dissatisfied with representation by Attorney, notwithstanding the reason(s), you may terminate the attorney-client relationship at any time by providing a written statement indicating that you wish the attorney-client relationship to end. If you decide to terminate the attorney-client relationship with Attorney, Attorney shall deduct any and all costs and expenses (including but not limited to: court fees, postage, copies, travel expenses) and attorney's fees (the number of hours spent on your matter by attorneys, paralegals and legal assistants, rounded to the nearest half-hour) incurred with respect to the matter from the retainer and you will be responsible for paying any additional amounts owed.

In the event that this office determines that you are not cooperating, unavailable, have failed to pay legal fees in accordance with this Agreement, have provided false information to this office, have not filed your case within five (5) months of this Agreement being signed, or some other circumstance under which this office cannot reasonable move forward with your matter, Attorney may terminate the attorney-client relationship by advising you of such in writing. In such case, Attorney shall deduct any and all costs and expenses (including court fees, postage, copies, travel expenses) and attorney's fees (the number of hours spent on the matter by attorneys, paralegals and legal assistants, rounded to the nearest half-hour) incurred with respect to the matter from the retainer and you will be responsible for paying any additional amounts owed, even if these amounts exceed the total flat fee in this agreement.

10. CLIENT FILES. We will keep your file in an electronic format only, either in the Attorney's office or in off-site storage, after the conclusion of the matter to which the files relate for the length of time required by the current laws/professional standards in place. You understands that you will receive copies of all documents related to your file and should retain these documents. If you require additional copies of your file you understand that you may be charged for such copies.

Client's Initials: 3

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REPRESENTATION AGREEMENT – CHAPTER 7 BANKRUPTCY

- 11. NO GUARANTEES. You understand and agree that we make no guarantees as to the discharge of any particular debt. You specifically acknowledge that priority debts including recent taxes, domestic support obligations, secured debts, taxes for years for which no return was filed or for which a return was filed within two (2) years of the bankruptcy filing, most debts arising out of divorce, and student loans are not dischargeable in a Chapter 7 case.
- 12. **SEVERABILITY.** If any part of this agreement is deemed invalid, illegal, or inoperative for any reason, it is the intention of the Client and the Attorney that the remaining parts, so far as possible and reasonable, shall be effective and fully operative.
- 13. JURISDICTION; MODIFICATION. This agreement is made in and shall be construed and governed under the laws of the State of Illinois and is effective when both the Attorney and the Client sign it. This agreement may only be modified by the written and fully executed agreement of the parties. This agreement is binding upon Client and Attorney and upon their respective successors, trustees, legatees, nominees, representatives, heirs and assigns.

AGREED to this 29 th day of Signature of Client	<u> July</u>	, 2015_: Breat L Herter Printed Name of Client
Signature of Client		Printed Name of Client

Client's Initials: \\\

On Behalf of Aiken & Aiken, LLC

United States Bankruptcy Court Northern District of Illinois

In re	Brent Leonard Herter		Case No.	
	Bronk Econdid Florida	Debtor(s)	Chapter	7
	VE	CRIFICATION OF CREDITOR MA	ATRIX	
		Number of C	Creditors: _	21
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of creditor	rs is true and	correct to the best of my
Date:	December 30, 2015	/s/ Brent Leonard Herter Brent Leonard Herter Signature of Debtor		

Advocate Good Shepherd Hospital PO Box 3039 Oak Brook, IL 60522-3039

Allstate Insurance Company PO Box 4303 Carol Stream, IL 60197

Ally P.O. Box 9001951 Louisville, KY 40290-1951

American Express P.O. Box 981535 El Paso, TX 79998-1535

BB&T Mortgage 39 College Street P.O. Box 2467 Greenville, SC 29602

Capital One P.O. Box 30285 Salt Lake City, UT 84130

Chase P.O. Box 15153 Wilmington, DE 19886

Citi Cards PO Box 78045 Phoenix, AZ 85062-8045

Credit Collections Services Two Welks Avenue, Dept. 9136 Newton Center, MA 02459

Discover PO Box 30421 Salt Lake City, UT 84130-0421

Douglas Smith Attorney at Law 2021 Midwest Rd, Ste 200 Oak Brook, IL 60523 DuPage Medical Group 15921 Collections Center Dr. Chicago, IL 60693

Firstsource Advantage LLC 205 Bryant Woods South Amherst, NY 14228

Fitness 19 189 Randall Road Algonquin, IL 60102

Jason & Sarah Ray 301 Appling Lane Bolingbrook, IL 60440

Merrick Bank PO Box 660702 Dallas, TX 75266-0702

MOHELA P.O. Box 105347 Atlanta, GA 30348

Nancy Herter 2018 Prentiss Dr. #204H Downers Grove, IL 60516

Synchrony Bank PO Box 960061 Orlando, FL 32896-0061

US Bank P.O. Box 790408 Saint Louis, MO 63179-0408

US Bank PO BOx 790288 Saint Louis, MO 63179-0288